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APPLICANTS

Lee S. Mighdoll, San Francisco, CA;
 Bruce A. Leak, Portola Valley, CA;
 Stephen G. Perlman, Mountain View, CA;
 Phillip Y. Goldman, Los Altos, CA;

**** CONTINUING DATA *******

This application is a CON of 09/095,457 06/10/1998 PAT 6,311,197
 which is a CIP of 08/656,924 06/03/1996 PAT 5,918,013
 which is a CIP of 08/660,087 06/03/1996 PAT 5,896,444

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED****** 01/31/2002**

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|---|-----------------------------------|---------------------------------|------------------------------|------------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY CA | SHEETS DRAWING 13 | TOTAL CLAIMS 1 | INDEPENDENT CLAIMS 1 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged | Examiner's Signature | Initials | | |

ADDRESS

47973

TITLE

METHOD OF IMPROVING ACCESS TO SERVICES PROVIDED BY A PLURALITY OF REMOTE SERVICE
 PROVIDERS

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| FILING FEE RECEIVED 1340 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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